. 🖈 🙃		PART B	B - FEE(S)	TRANSMITTAL		<i>,</i>	
Complete and end this form together with applicable fee(s), to				P.O. Box 1450	E FEE or Patents ginia 22313-1450		
/ PED		or <u>F</u>		5 22010 1 100			
INSTRUCTIONS This for appropriate. All fundamental indicated unless corrected maintenance fee notification	m should be used for transcribed by the concerning	e in Block 1, by (a	JE FEE and I rders and notin a) specifying a	PUBLICATION FEE (if requirements fication of maintenance fees a new correspondence address	nired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 47382 7590 12/01/2005				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
CARMEN B. PATTI & ASSOCIATES, LLC ONE NORTH LASALLE STREET 44TH FLOOR CHICAGO, IL 60602				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
_				Pattu	Patty Geber (Depositor's name)		
03/01/2006 EAYALEW2 00000036 122325 09847567				\<	Pattu	(Signature)	
01 FC:1501 1400.00 DA 02 FC:1504 300.00 DA					K2-	24-06 (Date)	
02 FC:1504 300.0 APPLICATION NO.	FILING DATE	FIRST NAMED INVENT		DINVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/847,567	05/02/2001	1	Krishna Bal	lachandran	18-10-25-3-51	5619	
TITLE OF INVENTION: RADIO LINK CONTROL WITH LIMITED RETRAI				HONG FOR STREAMING SE	DVICES		
APPLN. TYPE SMALL ENTITY ISSUE F		EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400		\$300	\$1700	03/01/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS	1		
MOORE JR, MICHAEL J		2666		370-349000	•		
1. Change of correspondence CFR 1.363).	address or indication of "F	ee Address" (37	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys				
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				OR, alternatively,			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT	(print or type)	140		
PLEASE NOTE: Unless recordation as set forth in				ear on the patent. If an assign for filing an assignment.		locument has been filed for	
(A) NAME OF ASSIGNEE LUCENT TECHNOLOGIES INC. (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
,	MURRAY HILL, N.	1 07974					
Please check the appropriate	STATE OF DELAW assignee category or category	RL ries (will not be pr	inted on the pa	atent): 🔲 Individual	orporation or other private gr	oup entity Government	
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☐ Issue Fee			A check in the amount of the fee(s) is enclosed.				
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				ctor is hereby authorized by count Number	enarge the required fee(s), or (enclose an extra c	opy of this form).	
5. Change in Entity Status (•					
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							

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